



(FORM UPDATED: 08/11/2010)

WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

2011-12

(session year)

<u>Assembly</u>

(Assembly, Senate or Joint)

Committee on Health...

COMMITTEE NOTICES ...

- Committee Reports ... CR
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INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... Appt (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... CRule (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)

 (ab = Assembly Bill) (ar = Assembly Resolution)

(sb = Senate Bill)

(**sr** = Senate Resolution)

(ajr = Assembly Joint Resolution) (sjr = Senate Joint Resolution)

(SI - Seriale Resolution) (SI - Ser

Miscellaneous ... Misc

^{*} Contents organized for archiving by: Stefanie Rose (LRB) (October 2013)

Assembly

Record of Committee Proceedings

Committee on Health

Assembly Bill 615

Relating to: prohibiting fingerprinting in connection with professional credentials issued by the Department of Safety and Professional Services or an examining board or affiliated credentialing board, except as provided in the statutes, and requiring the exercise of rule-making authority.

By Representatives Severson, Litjens, Steineke, Spanbauer and Weininger; cosponsored by Senator Galloway.

March 07, 2012

Referred to Committee on Health.

March 13, 2012

PUBLIC HEARING HELD

Present:

(10) Representatives Stone, Severson, Kaufert, Van Roy, Strachota, Litjens, Richards, Pasch,

Seidel, C. Taylor.

Absent:

(0) None.

Excused:

(1) Representative Petersen.

Appearances For

- Rep. Erik Severson; Author, Star Prairie 28th Assembly District
- Jeremy Levin, Sauk City Rural Wisconsin Health Cooperative

Appearances Against

• None.

Appearances for Information Only

• None.

Registrations For

- Sen. Pam Galloway; Author, Wausau 29th Senate District
- Mark Grapentine, Madison WI Medical Society
- Michael Welsh, Madison WI Academy of Family Physicians

Registrations Against

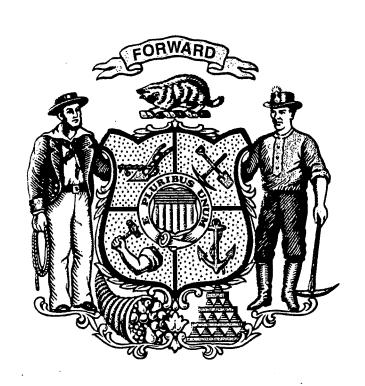
• None.

Registrations for Information Only

• None.

March 15, 2012 Failed to pass pursuant to Senate Joint Resolution 1.

Marsha Dake Committee Clerk





Testimony on Assembly Bill 615 Assembly Committee on Health March 13, 2012

Mr. Chairman and committee members, I would like to thank you for hearing Assembly Bill 615 (AB 615) today. The legislation that is before us has a simple purpose, which is to prevent the Department of Safety and Professional Services (DSPS) from unilaterally mandating that applicants for professional credentials provide fingerprints, with certain exceptions; those are outlined in the Legislative Reference Bureau's summary.

Many credentialed professionals in the State of Wisconsin must comply with a number of prerequisite criteria to even be eligible to apply for a license in many cases. For those that already possess a professional license, these individuals may find themselves having to comply with continuing education credits, new professional certifications, among other requirements, to keep their licensure current.

I urge you and your fellow committee members to go to the Department's website and look through the various application packets that some of our constituents have to fill out to work in their professions. The process can be time consuming and costly depending on the license. Passing AB 615 will simply remove some of the red tape that applicants already experience and make the process more user friendly. I would like to thank the Chair and the committee members for hearing this bill today. Also, I would like to thank Representative Severson for his leadership on this issue.



WISCONSIN STATE LEGISLATURE





TO: Assembly Committee on Health

Representative Stone, Chair

FROM: Jeremy Levin, Director of Advocacy

Rural Wisconsin Health Cooperative

DATE: March 13, 2012

RE: SUPPORT Assembly Bill 615 – Relating to fingerprinting

The Rural Wisconsin Health Cooperative (RWHC), owned and operated by 34 rural community hospitals, thanks you for this opportunity to share our thoughts on Assembly Bill 615, which relates to the prohibition of fingerprinting in connection with professional credentials. RWHC thanks the authors, Representative Severson and Senator Galloway, for introducing a legislative fix responding to the enactment of CR11-027, which allowed the Medical Examining Board (MEB), through the Department of Safety and Professional Services (DSPS), to require that new applicants for physician licensure submit fingerprint cards and undergo background checks. RWHC is concerned that the rule will have negative effects upon workforce availability in our rural and underserved populations across the state. RWHC provides Credentialing Services to many rural hospitals and clinics, and we believe the requirement for fingerprinting will cause problems for these entities that contract with us, and ultimately, the patients that rely on these physicians.

Specifically, RWHC is concerned that the rule will create an undue burden logistically and financially upon new applicants and potentially cause a chilling effect in recruiting more physicians to rural Wisconsin. The financial burden of submitting and processing the fingerprint cards will fall to the physician applicant. However, the logistical burden of where a physician applicant may have to go to submit fingerprint cards is unclear. Will the applicant potentially have to drive hundreds of miles to Madison to get fingerprinted at DSPS? Alternatively, would they be forced to contact a local law enforcement department and arrange the creation and submittal of the fingerprint cards? For the hospital or physician group desperately trying to recruit new physician applicants to rural Wisconsin, this will be an extreme and unnecessary burden. Further, this will likely cause additional delay in an already slow process, which could affect the physicians' start date, the practice site's financial sustainability, and patient care.

Ironically, prior to the rule's enactment, both the DSPS and the MEB have the authority to request a new physician applicant to submit fingerprints and undergo criminal background checks. Prior to the rule, §. RL 4.07 and RL 4.08, stated that DSPS may require an applicant for physician licensure to submit fingerprints and undergo a criminal background check if "there exists reason to believe that the applicant has failed to accurately describe his or her conviction record."

Wisconsin has made great strides in their licensing procedures in helping employers recruit and hire the medical professionals that their communities need. One such example was when the MEB simplified the process to allow reciprocal licensing of Minnesota physicians in Wisconsin, a move that helps border communities, allows easier relocation and maintains the high medical practice standards of both states. However, Minnesota does not require new applicants to undergo fingerprinting. Will Wisconsin's new rule complicate reciprocal licensing?

Thank you again for this opportunity to comment on and express our support for AB 615. We encourage the Committee the Committee to act on the bill, so that it might become law before the end of the current legislative session. The fingerprinting procedures would present an undue logistical and financial burden to all new physician applicants and disproportionately affect those applicants wanting to practice in Wisconsin's underserved rural areas



WISCONSIN STATE LEGISLATURE





Statement on Assembly Bill 615 / Senate Bill 464

The Wisconsin Academy of Family Physicians (WAFP) supports Assembly Bill 615 and Senate Bill 464 – legislation relating to the prohibition of fingerprinting in connection with state-issued professional credentialing.

While the WAFP supports a comprehensive licensing process to practice medicine and surgery in Wisconsin to help ensure patient safety and quality care, the fingerprinting requirements created by the enactment of CR 11-027 establish an unnecessary regulatory and financial burden on new physician applicants.

Wisconsin is already facing a significant physician shortage, and CR 11-027 would only serve to further strain the physician workforce by making it more difficult to recruit new physicians to practice in Wisconsin.

The WAFP believes passage of AB 615/SB 464 is necessary to address an undue regulatory and financial burden created by CR 11-027 and would urge the Legislature to do so before the end of the current legislative session.